

**PATENT APPLICATION FEE DETERMINATION RECORD**

Substitute for Form PTO-575

67-438890

**CLAIMS AS FILED - PART I**

FOR		NUMBER FILED	NUMBER EXTRA
MAJOR TYPE (OF CFA 1, 4, 6, 8)			
STATE CLAIMS (OF CFA 1, 4, 6, 8)			
INDEPENDENT CLAIMS (OF CFA 1, 4, 6, 8)			
MULTIPLE DEPENDENT CLAIM PRESENT			

MAJOR DEFICIENT CLAIM PRESENT. (7 OF 8 LINES)

\* If the difference is unknown, it is less than zero, order "W" is unknown.

**CLAIMS AS AMENDED - PART 6**

AMENDMENT #	(Column 1)		(Column 2)	(Column 3)
	CLAIM RESUBMITTED AFTER AUSPACET		RECEIVED RECEIVED PAC FOR	PAYMENT DUE
4.11.16	ELC			
	Total of 0.1500			
	of 0.1500			
	of 0.1500			

FIRST REFORMATION OF MULTIPLE DEFINED CLAIM (0.1500)

2 FIRST NARRATION OF MULTIPLE DEFENDANT CLAIM (37 CFR 1.510)

SMALL ENTRY	
DATE	FEES
NO. _____	_____
NO. _____	_____
NO. _____	_____
TOTAL	_____

•

OTHER THAN SMALL ENTITY	
RATE	FEE
12.00	2.00
12.00	
12.00	
TOTAL	

AMENDMENT 8

TIME OF ON LINE
INFORMATION OF ON LINE

AMENDMENT	Column 1 CLAIM REMAINS AFTER AMENDMENT		Column 2 HIGHEST NUMBER PREVIOUSLY PAID FOR		Column 3 PRESENT EXTRA
	THE GROSS LOSS	LESS	THE GROSS LOSS	LESS	
1	50		66		0
2	4		6		0

FIRST PRESENTATION OF MULTIPLE DEFICIENCY CLAIM BY CFR 1.1000

STATE PRESENTATION OF MULTIPLE DEFENDANT CLAIM BY OFF. L. 1983

RATE	ACCT- NUMBER PER
7.50	
2.00	
+1.00	
<b>TOTAL</b>	
<b>ADD. FEE</b>	

On

DATE	ACCOMPLISHED FOR
11-50	
11-100	
11-3100	
11-1000	
11-1000	

9/21/04

Column 1	Column 2	Column 3
CLAIMS REMAINS AFTER ALLEGEDLY	PAYMENT NUMBER PREVIOUSLY PAID FOR	PAYMENT EXTRA
11	50	0
1	4	0

NOTE: FIRST PAYMENT OF MULTIPLE DIFFERENT CLAIMS OF OVER LOSS

1. THE PRODUCTION OF MATERIALS CAPTIONED AS ABOVE BY OR FOR L. 1000

DATE	ADD- TERRA- FEE
12-23	
12-10	
12-10	
WEEK	
ADD FEE	

城

DATE	ADD- TODAY PTE
NO.	
NO.	
NO.	
TOTAL ADD- PTE	

1. **First Name** \_\_\_\_\_

[illegible]

*If you need assistance in completing this form*

understand in the current state  
of affairs of which a report by  
CWA 1.14. This collection is not  
CWA. This will vary depending on  
circumstances, should be sent to C  
CWA-1.14. DO NOT SEND FOR  
CWA-1.14.

• **2008** – **100th Anniversary** of the **1908** **Chicago** **Exposition**

Form 1.

It is to be used by the  
taxpayers to complete  
the return. Any increase  
in the amount of the  
return, U.S. Federal  
income tax to which

[illegible]

If you need assistance in completing this form, call 1-800-872-6779 and select option 2.